

For office use only:

☐ \$25 Processing Fee Paid _____

FORM CG-Schedule-A

Rev. 2/02

☐ 1st ☐ 2nd ☐ 3rd ☐ 4th
Special License for License Year _____

**Commonwealth of Kentucky
Public Protection & Regulation Cabinet
Department of Charitable Gaming**

If two or more CG-Sch A's are submitted together, only one \$25 processing fee will be charged.

**Application for Charity Fundraising Event License
or Special Limited Charity Fundraising Event License**

1. NAME OF APPLICANT (CHARITABLE ORGANIZATION): _____

2. LICENSE NUMBER: **ORG-**_____ EXPIRATION DATE: _____

3. DATE(S) OF EVENT:	DATE	BEGINNING TIME	ENDING TIME
DAY 1	____/____/____	_____ am pm	_____ am pm
DAY 2	____/____/____	_____ am pm	_____ am pm
DAY 3	____/____/____	_____ am pm	_____ am pm

NOTE: WHEN APPLYING FOR MORE THAN ONE EVENT, SUBMIT A SEPARATE CG-SCHEDULE A FOR EACH EVENT.

4a. WILL THE GAMING ACTIVITY BE CONDUCTED AT A LOCATION OTHER THAN THAT STATED ON YOUR CHARITABLE GAMING LICENSE? ☐ YES or ☐ NO (IF NO, GO TO QUESTION 5)

4b. STREET ADDRESS OF LOCATION AT WHICH CHARITABLE GAMING WILL BE CONDUCTED:

Name of Building: _____
Street Address: _____
City, State, and Zip _____
County: _____

4c. A COPY OF A SIGNED LEASE AGREEMENT OR STATEMENT OF OTHER UNDERSTANDING BETWEEN THE ORGANIZATION AND THE OWNER OF THE PREMISES **MUST** BE SUBMITTED WITH THIS APPLICATION.

5. PLEASE LIST **NUMBER** OF TABLES/BOOTHs FOR EACH TYPE OF GAMING ACTIVITY TO BE CONDUCTED:

#_____ Bingo	#_____ Blackjack
#_____ Horse Race Bingo	#_____ Poker
#_____ Prerecorded Horse Racing	#_____ Dice Games
#_____ Pulltabs	#_____ Roulette
#_____ Raffles	#_____ Keno
#_____ Non-Cash Prize Wheel Games	#_____ Baccarat
(Prize value does not exceed \$100)	#_____ Pusher-Type Games
#_____ Duck Race	#_____ Money Wheels (Cash Prizes)
#_____ *Other: _____	#_____ Non-Cash Prize Wheel Games
#_____ *Other: _____	(Prize Value exceeds \$100)
#_____ Horse Race by Roll of Dice	

*BRIEF DESCRIPTION OF **OTHER** GAME LISTED ABOVE (*OTHER*) AND EXPLANATION OF HOW PRIZES ARE AWARDED:

NOTE: REFER TO KRS 238.505(8) FOR DEFINITION OF “CHARITY FUNDRAISING EVENT.”

- 6a. WILL THE GAMING ACTIVITIES LISTED IN QUESTION 5 BE CONDUCTED AT AN EVENT SPONSORED BY YOUR ORGANIZATION THAT IS OTHERWISE DESCRIBED AS A FAIR, FESTIVAL, CARNIVAL, OR BAZAAR?

☐ **YES** or ☐ **NO (IF NO, GO TO QUESTION 7)**

- 6b. PLEASE STATE THE OFFICIAL NAME OF THE EVENT (FAIR, FESTIVAL, CARNIVAL, OR BAZAAR), AS IT WILL BE ADVERTISED TO THE GENERAL PUBLIC (i.e. ABC COUNTY FAIR, XYZ CHURCH SUMMER FESTIVAL, CHRISTMAS BAZAAR).

- 6c. PLEASE DESCRIBE ALL NON-GAMING ACTIVITIES TO BE CONDUCTED AT THIS EVENT THAT REFLECT THE CONDUCT OF A FAIR, FESTIVAL, CARNIVAL, OR BAZAAR. (AN EXAMPLE WOULD BE CARNIVAL RIDES, FISH FRY, MOTIVATIONAL SPEAKERS, CRAFT BOOTHS, GOLF TOURNAMENT, 5K RACE, ETC.)

- 7a. DISTRIBUTOR(S) APPLICANT WILL USE FOR CHARITABLE GAMING EQUIPMENT OR SUPPLIES:

NAME: _____	NAME: _____
KY. LICENSE NUMBER: DIS- _____	KY. LICENSE NUMBER: DIS- _____
ADDRESS: _____	ADDRESS: _____
_____	_____

NAME: _____	NAME: _____
KY. LICENSE NUMBER: DIS- _____	KY. LICENSE NUMBER: DIS- _____
ADDRESS: _____	ADDRESS: _____
_____	_____

(ATTACH ADDITIONAL SHEETS, IF NECESSARY)

- 7b. ATTACH A COPY OF THE WRITTEN AGREEMENT BETWEEN THE ORGANIZATION AND THE DISTRIBUTOR FOR THIS EVENT.

NOTE: This application will NOT be processed unless it is signed by an officer of the organization who is listed in response to Questions 15a or 15b of the CG-1 application currently on file in the Division of Licensing and Compliance, Kentucky Department of Charitable Gaming.

CERTIFICATION

I CERTIFY, UNDER PENALTY OF PERJURY, THAT I AM AN OFFICER AUTHORIZED BY THE APPLICANT TO MAKE APPLICATION FOR LICENSURE AND THAT I HAVE EXAMINED THIS APPLICATION FOR LICENSURE, INCLUDING ACCOMPANYING MATERIALS, AND ALL INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT. I FURTHER CERTIFY THAT THE APPLICANT AGREES TO COMPLY WITH ALL APPLICABLE LAWS AND ADMINISTRATIVE REGULATIONS REGARDING CHARITABLE GAMING IN THE COMMONWEALTH OF KENTUCKY.

SIGNATURE: _____

PRINT NAME: _____

TITLE: _____

MAIL COMPLETED APPLICATION (INCLUDING ALL REQUIRED ATTACHMENTS), TOGETHER WITH THE \$25.00 PROCESSING FEE MADE PAYABLE TO "KENTUCKY STATE TREASURER" TO:

**COMMONWEALTH OF KENTUCKY
PUBLIC PROTECTION & REGULATION CABINET
DEPARTMENT OF CHARITABLE GAMING
DIVISION OF LICENSING & COMPLIANCE
132 BRIGHTON PARK BOULEVARD
FRANKFORT, KY 40601-3714**

IF YOU NEED ANY HELP COMPLETING THIS APPLICATION, PLEASE CALL THE LICENSING BRANCH AT (502) 573-5528 OR TOLL-FREE IN KENTUCKY, (800) 729-5672.

VISIT OUR WEBSITE AT:
<http://dcg.state.ky.us>